Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Sharon	
	your government-issued picture identification (for example, your driver's	First name	First name
license o	license or passport).	Middle name	Middle name
	Bring your picture	Roberts	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0862	

Deb	otor 1 Sharon Roberts		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	26 Bloomington Street	If Debtor 2 lives at a different address:		
		Medford, NY 11763  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Suffolk			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	otor 1 Sharon Roberts				Case number (if known)			
Par	t 2: Tell the Court About	our Bankruptc	y Case					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about ho order. If y a pre-prii	w you may pay. Ty your attorney is sub nted address.	rpically, if you are paying the feetomitting your payment on your b	neck with the clerk's office in your local by yourself, you may pay with cash, cash behalf, your attorney may pay with a cre	nier's check, or money edit card or check with		
		☐ I need to	pay the fee in ins General Fee in Installmer	stallments. If you choose this o nts (Official Form 103A).	ption, sign and attach the Application f	or Individuals to Pay		
		☐ I request but is not applies to	t that my fee be w t required to, waive o your family size a	raived (You may request this op e your fee, and may do so only if and you are unable to pay the fe	tion only if you are filing for Chapter 7. your income is less than 150% of the e in installments). If you choose this op fficial Form 103B) and file it with your	official poverty line that otion, you must fill out		
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	□ Yes.						
	iasi o years :	Dist	trict	When	Case number			
		Dist						
		Dist		When	Case number			
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Deb	otor		Relationship to you			
		Dist	rict	When	Case number, if know	າ		
		Deb	otor		Relationship to you			
		Dist	rict	When	Case number, if know	າ		
11.	Do you rent your residence?	■ No. Go	to line 12.					
		☐ Yes. Ha	ıs your landlord ob	tained an eviction judgment aga	inst you?			
			No. Go to line	e 12.				
			Yes. Fill out Interest this bankrupton		on Judgment Against You (Form 101A)	and file it as part of		

Deb	tor 1 Sharon Roberts			Case number (if known)			
Part	Report About Any Bu	sinesses	You Own as a Sole Propri	etor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bu	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code				
	it to this petition.		Check the appropriate b	ox to describe your business:			
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abov	/e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
				Number, Street, City, State & Zip Code			

Debtor 1 Sharon Roberts Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Sharon Roberts			Case number (	(if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consundividual primarily for a personal		d in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				ess debts? Business debts are debts the ent or through the operation of the business			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c	State the type of debts you owe t	hat are not consumer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7. G	Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
			No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
		□ \$100,001 - \$500,000 ■ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>—</b> \$500,00	) i - \$1 million	<b>Δ</b> ψ100,000,001 - ψ300 Hillion	I wore than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$5		■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	to be?		1 - \$100,000 01 - \$500,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have exa	mined this petition, and I declare	under penalty of perjury that the informa	tion provided is true and correct.		
				m aware that I may proceed, if eligible, un available under each chapter, and I choo			
				ay or agree to pay someone who is not a tice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this		
		I request r	elief in accordance with the chapt	ter of title 11, United States Code, specif	ied in this petition.		
		bankruptcy and 3571.		cealing property, or obtaining money or p 250,000, or imprisonment for up to 20 year	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Sharon F Signature	Roberts	Signature of Debtor 2			
		Executed	on <b>August 14, 2018</b>	Executed on			
			MM / DD / YYYY		DD / YYYY		

Debtor 1 Sharon Roberts		Case	Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Ur	nited States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)				
If you are not represented by an attorney, you do not need to file this page.		es, certify that I have no know	ledge after an inquiry that the information in the				
	/s/ Donald Neidhardt	Date	August 14, 2018				
	Signature of Attorney for Debtor		MM / DD / YYYY				
	Donald Neidhardt						
	Printed name						
	Neidhardt Law						
	Firm name						
	3579 Bayview Street						
	Seaford, NY 11783						
	Number, Street, City, State & ZIP Code		-				
	Contact phone (516) 809-7900	Email address	pj@neidhardt.law				
	NY						
	Bar number & State						

Fill	in this informa	ation to identify your	case:				
Deb	otor 1	Sharon Roberts					
Deh	otor 2	First Name	Middle Name	Last Name			
	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Banl	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Cas (if kn	se number					☐ Check	if this is an
						amen	ded filing
		m 106Sum		nd Contain Otatiotics	l lofo week to a		
				nd Certain Statistica			12/15 a correct
info	rmation. Fill o	ıt all of your schedul	es first; then complete t	the information on this form. If	you are filing amend		
Par	t 1: Summa	rize Your Assets					
						Your as	ssets If what you own
1.	Schedule A/I 1a. Copy line	<b>3: Property</b> (Official Fe 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	690,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	6,900.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	696,900.00
Par	t 2: Summa	rize Your Liabilities					
							abilities t you owe
2.			laims Secured by Proper mn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of P	art 1 of Schedule D	\$	820,534.29
3.	Schedule E/F 3a. Copy the	: Creditors Who Have total claims from Part	Unsecured Claims (Offici	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule i	E/F	\$	265,633.00
					Your total liabilities	\$	1,086,167.29
Par	t 3: Summa	rize Your Income and	Expenses				
	•	our Income (Official Fo					
4.				le I		\$	0.00
5.		our Expenses (Officia onthly expenses from li	,			\$	5,315.40
Par	t 4: Answer	These Questions for	Administrative and Sta	tistical Records			
6.			er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this fo	rm to the court with yo	ur other sch	nedules.
7.	■ Yes What kind of	debt do you have?					
				debts are those "incurred by an 9g for statistical purposes. 28 U.		a personal,	family, or
	☐ Your de	bts are not primarily	consumer debts. You ha	ave nothing to report on this part	ū	s <i>box</i> and s	ubmit this form to
· · · ·	tne cour	with your other sched	uies.		_		

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Sharon Roberts Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
,	•	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	258,163.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	258,163.00

	rmation to identify	your case and th	is filing:				
Debtor 1	Sharon Rob	erts					
	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States B	Sankruptcy Court for	the: EASTERN	DISTRIC	T OF NEW YORK			
Case number							Check if this is ar amended filing
	orm 106A/E <b>le A/B: P</b> i	_					12/15
Part 1: Describe  Do you own or	estion. e Each Residence, B r have any legal or eq	uilding, Land, or Ot	her Real E	is form. On the top of any additional pages Estate You Own or Have an Interest In nce, building, land, or similar property?	s, write your name and o	case nu	mber (if known).
	Bloomington Street eet address, if available, or other description		What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative		Do not deduct secure the amount of any sec Creditors Who Have 0	cured cla	aims on Schedule D:
							secured by Property.
Medford	NY State	11763-0000		Manufactured or mobile home  Land	Current value of the entire property?	p	urrent value of the ortion you own?
<b>Medford</b> City	NY State	11763-0000 ZIP Code		Land Investment property Timeshare Other	\$350,000.00  Describe the nature (such as fee simple,	0 of your tenancy	urrent value of the ortion you own? \$350,000.00 ownership interest
			Uho h	Land Investment property Timeshare	\$350,000.00  Describe the nature	0 of your tenancy	urrent value of the ortion you own? \$350,000.00 ownership interest
			Uho h	Land Investment property Timeshare Other as an interest in the property? Check one	\$350,000.00  Describe the nature (such as fee simple, a life estate), if know	0 of your tenancy	urrent value of the ortion you own? \$350,000.00 ownership interest
City			Who h	Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	pentire property? \$350,000.00  Describe the nature (such as fee simple, a life estate), if know  Fee simple  Check if this is o	of your tenancy	urrent value of the ortion you own? \$350,000.00 ownership interest y by the entireties, or
City			Who h	Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only	entire property? \$350,000.00  Describe the nature (such as fee simple, a life estate), if know Fee simple  Check if this is (see instructions)	of your tenancy	urrent value of the ortion you own? \$350,000.00 ownership interest y by the entireties, or

Debtor 1 Sharon	Roberts	Case	e number (if known)	
	nave more than one, list			
1.2	I A	What is the property? Check all that apply		
3010 Watchhill		Single-family home	Do not deduct secured c	
Street address, if availa	able, or other description	Duplex or multi-unit building	,	ed claims on Schedule D: ims Secured by Property.
		Condominium or cooperative	Creditors who have old	ins decured by Froperty.
		_		
		Manufactured or mobile home	Current value of the	Current value of the
Medford	NY 11763-0000	Land	entire property?	portion you own?
City	State ZIP Code	☐ Investment property	\$340,000.00	\$340,000.00
		☐ Timeshare	Describe the nature of	your ownership interest
		Other		nancy by the entireties, or
		Who has an interest in the property? Check one	a life estate), if known.	
		Debtor 1 only	Fee simple	
Suffolk		Debtor 2 only		
County		Debtor 1 and Debtor 2 only	Ohaalait thia ia aan	
		At least one of the debtors and another	Check if this is cor (see instructions)	nmunity property
		Other information you wish to add about this ite	m, such as local	
		property identification number:		
		Investment property		
Cars, vans, trucks,  ■ No □ Yes  Watercraft, aircraft	tractors, sport utility vehic	ort it on Schedule G: Executory Contracts and Unites, motorcycles  ther recreational vehicles, other vehicles, and craft, fishing vessels, snowmobiles, motorcycle according to the contract of the contract o	accessories	
.pages you have at	tached for Part 2. Write that	or all of your entries from Part 2, including any t number here		\$0.00
	Personal and Household Items			O
•		est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	opliances, furniture, linens, ch	ina, kitchenware		
Yes. Describe				
		hold goods supplies and furnishings nington Street, Medford NY 11763		\$2,000.0

Debtor 1	Sharon Roberts	Case number (if known)
□ No		quipment; computers, printers, scanners; music collections; electronic devices
<b>—</b> 165.	Computers, TVs, stereo, cell phon	
	Location: 26 Bloomington Street, l	
Example No	ibles of value  les: Antiques and figurines; paintings, prints, or other artwork other collections, memorabilia, collectibles  Describe	books, pictures, or other art objects; stamp, coin, or baseball card collections;
Example No	nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipments  Describe	nt; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools;
■ No	ms  ples: Pistols, rifles, shotguns, ammunition, and related equipe  Describe	nent
□ No	ples: Everyday clothes, furs, leather coats, designer wear, should be	pes, accessories
	Location: 26 Bloomington Street, I	ledford NY 11763 \$500.00
□ No	ples: Everyday jewelry, costume jewelry, engagement rings,  Describe  watches, rings, necklaces and oth Location: 26 Bloomington Street, l	er costume jewelry
Exam <sub>l</sub> ■ No	arm animals  ples: Dogs, cats, birds, horses  Describe	
■ No	ther personal and household items you did not already li Give specific information	t, including any health aids you did not list
	the dollar value of all of your entries from Part 3, includinart 3. Write that number here	
	escribe Your Financial Assets	lowing?
טט you ov	wn or have any legal or equitable interest in any of the fo	lowing?  Current value of the portion you own?  Do not deduct secured

claims or exemptions.

De	ebtor 1	Sharon Roberts			Case number (if known)	
	Cash Examp □ No	oles: Money you have in yo	our wallet, in your home, ir	n a safe deposit box, and on han	d when you file your petition	
	Yes					
					Cash Location: 26 Bloomington Street, Medford NY 11763	\$1,000.00
	Examp _			certificates of deposit; shares in he same institution, list each.	credit unions, brokerage houses	, and other similar
	□ No ■ Yes			Institution name:		
		17.1.	Checking Acct. No. 1705	TD Bank		\$400.00
		, mutual funds, or public bles: Bond funds, investme	ent accounts with brokerag	e firms, money market accounts	i .	
	☐ Yes		Institution or issuer name:			
	joint v		interests in incorporated	l and unincorporated business	ses, including an interest in an	LLC, partnership, and
	■ No					
	⊔ Yes.	Give specific information Nar	about them ne of entity:		% of ownership:	
	Negoti	<i>able instrument</i> s include p	ersonal checks, cashiers'	e and non-negotiable instrumed checks, promissory notes, and r to someone by signing or deliver	money orders.	
		Give specific information a	about them uer name:			
		nent or pension account oles: Interests in IRA, ERIS		thrift savings accounts, or other	pension or profit-sharing plans	
	☐ Yes.	List each account separat Type	ely. of account:	Institution name:		
	Your sl Examp		s you have made so that y	vou may continue service or use utilities (electric, gas, water), tele		others
	■ No □ Yes.			Institution name or individual:		
	Annuiti ■ No	ies (A contract for a period	dic payment of money to y	ou, either for life or for a number	of years)	
	Yes	lssuer nam	e and description.			
24.		s in an education IRA, ir C. §§ 530(b)(1), 529A(b),		ed ABLE program, or under a q	pualified state tuition program.	
	■ No □ Yes	Institution r	name and description. Sep	arately file the records of any into	erests.11 U.S.C. § 521(c):	
		equitable or future inte	ests in property (other t	han anything listed in line 1), a	and rights or powers exercisal	ole for your benefit
	■ No □ Yes.	Give specific information	about them			

Debtor 1	Sharon Roberts		Case number (if known)			
Exam ■ No		secrets, and other intellectual property iites, proceeds from royalties and licensing agreeme	nts			
27. <b>Licens</b> Exam ■ No	ses, franchises, and other gener	al intangibles enses, cooperative association holdings, liquor licer	nses, professional licenses			
	property owed to you?			Current value of the portion you own? Do not deduct secured		
☐ No	funds owed to you  Give specific information about th	em, including whether you already filed the returns a	nd the tax years	claims or exemptions.		
		2017 Tax refund Location: 26 Bloomington Street, Medford NY 11763	Federal	\$1,500.00		
■ No □ Yes.  30. Other Exam	ples: Past due or lump sum alimon Give specific information amounts someone owes you	y, spousal support, child support, maintenance, divo				
Exam ■ No	Name the insurance company of		·			
If you some	Company name:  Beneficiary:  Surrender or refund value:  32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.					
Exam ■ No		or not you have filed a lawsuit or made a demand tes, insurance claims, or rights to sue	for payment			
■ No	contingent and unliquidated cla  Describe each claim	ims of every nature, including counterclaims of t	he debtor and rights to set	off claims		
■ No	nancial assets you did not alread	ly list				

Deb	otor 1	Sharon Roberts		Case number (if known)	
36.		ne dollar value of all of your entries from Part 4, including rt 4. Write that number here			\$2,900.00
Part	t 5: Des	cribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. <b>[</b>	Do you o	wn or have any legal or equitable interest in any business-relate	d property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	t 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.		have other property of any kind you did not already list?  les: Season tickets, country club membership	•		
	■ No	,			
	☐ Yes. (	Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$690,000.00
		: Total vehicles, line 5	\$0.00		· · · · · · · · · · · · · · · · · · ·
57.	Part 3	: Total personal and household items, line 15	\$4,000.00		
58.	Part 4	: Total financial assets, line 36	\$2,900.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6,900.00	Copy personal property total	\$6,900.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$696,900.00

	II in this inform					<b>-</b>	
	ebtor 1	nation to identify your	ease:				
De	ebior i	Sharon Roberts First Name	Middle Name	Li	ast Name		
1 -	ebtor 2 pouse if, filing)	First Name	Middle Name	1:	ast Name		
l` .	, 0,		EASTERN DISTRICT OF				
Ur	lited States Bai	nkruptcy Court for the:	EASTERN DISTRICT OF	- NEW YO	JKN		
	ase number known)					Check if this is an amended filing	
0	fficial Fo	rm 106C					
S	chedule	e C: The Pro	operty You C	laim	as Exempt	4/16	
the nee	property you lis	sted on <i>Schedule A/B: F</i> d attach to this page as r	Property (Official Form 106A	√B) as yo	ur source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and	
spe any fun exe	ecific dollar an y applicable st ids—may be u emption to a pa	nount as exempt. Alter atutory limit. Some exe nlimited in dollar amou	natively, you may claim themptions—such as those unt. However, if you claim	he full fai for healt an exem	r market value of the property be th aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited	
Pa	art 1: Identif	y the Property You Cla	im as Exempt				
1.			-	even if yo	ur spouse is filing with you.		
	You are cla	aiming state and federal	nonbankruptcy exemptions	s. 11 U.S	S.C. § 522(b)(3)		
		· ·	ns. 11 U.S.C. § 522(b)(2)				
2.		,	5 ( ) ( )	exempt.	fill in the information below.		
		on of the property and line	•	• •	ount of the exemption you claim	Specific laws that allow exemption	
	Schedule A/B	that lists this property	portion you own Copy the value from	o Cho	ck only one box for each exemption.		
			Schedule A/B	i one	ok only one box for each exemption.		
	26 Bloomin 11763 Suff	gton Street Medford	l, NY \$350,000.0	0 🗆		NYCPLR § 5206	
	Residence	nedule A/B: <b>1.1</b>		•	100% of fair market value, up to any applicable statutory limit		
	3010 Watch 11763 Suff	hill Avenue Medford	d, NY \$340,000.0	0	\$0.00	No exemption claimed	
	Investment				100% of fair market value, up to any applicable statutory limit		
		household goods	\$2,000.0	0	\$2,000.00	NYCPLR § 5205(a)(5)	
	Location: 2 Medford N	6 Bloomington Stree	et,		100% of fair market value, up to any applicable statutory limit		
		, TVs, stereo, cell ph 6 Bloomington Stree		0 🗆		Debtor & Creditor Law §	
	Medford N		5L,		100% of fair market value, up to	283(1)	

Official Form 106C

\$500.00

any applicable statutory limit

100% of fair market value, up to

any applicable statutory limit

Used women's clothing Location: 26 Bloomington Street,

Line from Schedule A/B: 7.1

Line from Schedule A/B: 11.1

Medford NY 11763

NYCPLR § 5205(a)(5)

DE	Snaron Roberts			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property				Specific laws that allow exemption
		Schedule A/B		,	
	watches, rings, necklaces and other costume jewelry	\$500.00			NYCPLR § 5205(a)(6)
	Location: 26 Bloomington Street, Medford NY 11763		•	100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 12.1				
	Cash	\$1,000.00			NYCPLR § 5205(a)(9)
	Location: 26 Bloomington Street, Medford NY 11763			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 16.1			any applicable statutory limit	
	Checking Acct. No. 1705: TD Bank Line from Schedule A/B: 17.1	\$400.00			NYCPLR § 5205(a)(9)
	Line from Schedule AVB: 17.1			100% of fair market value, up to any applicable statutory limit	
	Federal: 2017 Tax refund Location: 26 Bloomington Street,	\$1,500.00		\$0.00	NYCPLR § 5205(a)(9)
	Medford NY 11763 Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No  Yes. Did you acquire the property covered No Yes	3 years after that for ca	ases fi	,	,

Fill in this information to identify yo					
Fill in this information to identify yo	ur case:				
Debtor 1 Sharon Robert	s			_	
First Name	Middle Name La	ast Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name La	ast Name		-	
United States Bankruptcy Court for the	EASTERN DISTRICT OF NEW YO	JRK		-	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
O#: ::   F 400D					
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Se	ecured	by Propert	У	12/15
	If two married people are filing together, out, number the entries, and attach it to the				
1. Do any creditors have claims secured by	by your property?				
☐ No. Check this box and submit	this form to the court with your other sch	nedules. You	u have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
			Column A	Column B	Column C
	more than one secured claim, list the credito is a particular claim, list the other creditors in tical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Sellect Portfolio Service	Describe the property that secures the	claim:	\$459,674.29	\$350,000.00	\$109,674.29
Creditor's Name	26 Bloomington Street Medford	d, NY			
	11763 Suffolk County				
P.O. Box 65450	Residence				
Salt Lake City, UT	As of the date you file, the claim is: Cher apply.	ck all that			
84165-0450	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as more	tgage or secu	ıred		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechar	nic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred 2007	Last 4 digits of account number	2496			
2.2 Sellect Portfolio Service	Describe the property that secures the	claim:	\$360,860.00	\$340,000.00	\$20,860.00
Creditor's Name	3010 Watchhill Avenue Medford 11763 Suffolk County	d, NY	·		
P.O. Box 65450	Investment property				
Salt Lake City, UT	As of the date you file, the claim is: Cheapply.	ck all that			
84165-0450	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as more	tgage or secu	ıred		
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
$\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred 2001	Last 4 digits of account number	1261			

Official Form 106D

Debtor 1	Sharon Roberts			Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of y	our entries in Column A on t	his page. Write that number here:	\$820,534.29	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			lue totals from all pages.	\$820,534.29	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in th	is information to identify your	case:				
Debtor 1	Sharon Roberts					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,		Middle Name	Last Name			
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK			
Case nu (if known)	mber				_	heck if this is an mended filing
Officia	l Form 106E/F					
Sched	dule E/F: Creditors W	ho Have Unsecu	ured Claims			12/15
Schedule eft. Attacl	G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec h the Continuation Page to this pag case number (if known).  List All of Your PRIORITY Un	ured by Property. If more spee. If you have no information	pace is needed, copy t	the Part you need, fill it οι	it, number the en	tries in the boxes on the
	ny creditors have priority unsecure					
_	o. Go to Part 2.	a ciao agao. you .				
Part 2:	es. List All of Your NONPRIORIT	Y Unsecured Claims				
	ny creditors have nonpriority unsec					
_	o. You have nothing to report in this p		ourt with your other sche	edules.		
■ Ye	es.					
unse	all of your nonpriority unsecured cl cured claim, list the creditor separatel one creditor holds a particular claim, I 2.	y for each claim. For each cla	im listed, identify what t	ype of claim it is. Do not list	claims already inc	luded in Part 1. If more
						Total claim
4.1	Caine & Weiner Co	Last 4 digits	s of account number	7246		\$4,202.00
	Nonpriority Creditor's Name  Po Box 55848	When was t	he debt incurred?	Opened 01/17		
	Sherman Oaks, CA 91413 Number Street City State Zlp Code	As of the da	ate you file, the claim i	s: Check all that apply		-
•	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Continge	nt			
I	Debtor 2 only	☐ Unliquida	ated			
I	Debtor 1 and Debtor 2 only	☐ Disputed				
I	$\square$ At least one of the debtors and and	Julici	NPRIORITY unsecured	d claim:		
	Check if this claim is for a com	•				
	debt s the claim subject to offset?	☐ Obligatio report as pri		ration agreement or divorce	that you did not	
	No	<u></u>	•	g plans, and other similar d	ebts	
1	☐ Yes	Other. Si	pecify Collection	Attorney Roto Roote	er	
		2	,	*		=

Debtor	Sharon Roberts		Case number (if know)			
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5069	\$277.00		
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 02/16 Last Active 7/06/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.3	Credit One Bank Na	Last 4 digits of account number	0619	\$728.00		
	Nonpriority Creditor's Name Po Box 98875	When was the debt incurred?	Opened 02/17 Last Active 4/26/18			
	Las Vegas, NV 89193	_				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	_					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim.			
	At least one of the debtors and another	Student loans	a Claim.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other Specify Credit Card				
4.4	Goldkey Cred Nonpriority Creditor's Name	Last 4 digits of account number	9311	\$586.00		
	P O Box 15670 Brooksville, FL 34604	When was the debt incurred?	Opened 11/23/13			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□Yes	■ Other. Specify Port Emerg	ency Medical Svc			

Debtor 1 Sharon Roberts		Case number (if know)			
4.5	Goldkey Cred	Last 4 digits of account number	3169	\$586.00	
	Nonpriority Creditor's Name P O Box 15670	When was the debt incurred?	Opened 8/24/13		
	Brooksville, FL 34604	When was the dest mounted.	Opened 0/24/10	-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •		
	Yes	Other. Specify Port Emerg	ency Medical Svc	-	
4.6	Goldkey Cred Nonpriority Creditor's Name	Last 4 digits of account number	0979	\$383.00	
	P O Box 15670 Brooksville, FL 34604	When was the debt incurred? Opened 1/11/14		-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	,		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Port Emerg	ency Medical Svc	-	
4.7	Goldkey Cred	Last 4 digits of account number	3170	\$68.00	
	Nonpriority Creditor's Name		0		
	P O Box 15670 Brooksville, FL 34604	When was the debt incurred?	Opened 8/24/13	-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Other. Specify Port Emerg	_		

Debtor	1 Sharon Roberts		Case number (if know)	
4.8	Jpm Chase Nonpriority Creditor's Name	Last 4 digits of account number	4370	Unknown
	P.o. Box 182057 Columbus, OH 43219	When was the debt incurred?	Opened 02/08 Last Active 1/31/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐Yes	Other. Specify		
		Educationa	ıl	
4.9	Merrick Bank Corp Nonpriority Creditor's Name	Last 4 digits of account number	4767	\$640.00
	Pob 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 09/17 Last Active 7/17/18	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Navient	Last 4 digits of account number	3489	\$101,073.00
	Nonpriority Creditor's Name		Opened 8/21/06 Last Active	
	Po Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	7/31/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	

Debtor 1	Sharon R	Roberts		Case number (i	f know)						
	Navient Nonpriority Cre	ditara Nama	Last 4 digits of account number	3471	_	\$85,690.00					
ı	Po Box 965		When was the debt incurred?	Opened 09/0 11/16/05	05 Last Active						
7	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check all that a	pply						
	■ Debtor 1 on	ılv	☐ Contingent								
	Debtor 2 on	•	☐ Unliquidated	☐ Unliquidated							
		d Debtor 2 only	Disputed								
		of the debtors and another	Type of NONPRIORITY unsecured								
	_	is claim is for a community	Student loans								
•	debt	is claim is for a community	☐ Obligations arising out of a separeport as priority claims	aration agreement o	or divorce that you did not						
	■ No	•	Debts to pension or profit-sharing	ng plans, and other	similar debts						
	☐ Yes		Other. Specify								
			Educationa	al							
_	Navient		Last 4 digits of account number	3497	_	\$71,400.00					
ı	Nonpriority Cre	ditor's Name		Opened 09/0	07 Last Active						
-	Po Box 965	<del>-</del>	When was the debt incurred?	7/31/14	or Last Active						
		re, PA 18773 City State Zlp Code	As of the date you file, the claim i	is: Check all that a	nnly						
		the debt? Check one.	no or the date you me, the ordina	io. Oneok all that a	PPI						
I	Debtor 1 on	ly	☐ Contingent								
1	Debtor 2 on	ly	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:								
1	Debtor 1 an	d Debtor 2 only									
1	At least one	of the debtors and another									
		is claim is for a community	Student loans								
	debt Is the claim su	ibject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	■ No		Debts to pension or profit-sharing								
	☐ Yes		Other. Specify								
			Educationa	al							
is trying have m	s page only if y g to collect fro lore than one o	om you for a debt you owe to some	out your bankruptcy, for a debt that y eone else, list the original creditor in ou listed in Parts 1 or 2, list the addi submit this page.	Parts 1 or 2, ther	n list the collection agency	here. Similarly, if you					
				onorting nurnoco	c only 20 H C C 84E0 Ad	d the emounts for each					
	unsecured cla		s. This information is for statistical re	eporting purpose	s only. 26 U.S.C. §159. Ad	u the amounts for each					
					Total Claim						
	6a.	Domestic support obligations		6a. \$	0.00	_					
	otal ims										
from Pa		Taxes and certain other debts y	<del>-</del>	6b. \$	0.00	=					
	6c.	Claims for death or personal inj		6c. \$	0.00	_					
	6d.	Otner. Add all other priority unsec	ured claims. Write that amount here.	6d. \$	0.00	-					
	6e.	Total Priority. Add lines 6a through	nh 6d	6e. \$	0.00						
		carrier sy rada milos od milodo	<del>y</del>	Ψ	0.00	-					
					Total Claim						
_	6f.	Student loans		6f. \$	258,163.00	-					
	otal ims rt 2 6a.	Obligations arising out of a sep	aration agreement or divorce that	6a. \$	0.00						

Debtor 1	Sharon R	oberts	Case n		
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00	
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 7,470.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 265,633.00	

Fill in this inform						
Debtor 1	Sharon Roberts					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK			
Case number _					_	
(if known)						Check if this is an amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Fill in this i	nformation to identify your	case:			
Debtor 1	Sharon Roberts				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	r) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case numbe	er				
(if known)					☐ Check if this is an amended filing
					amondou ming
Official	Form 106H				
Schedu	ule H: Your Cod	ebtors			12/15
eople are f	iling together, both are equ	ally responsible for supp	lying correct informat	ion. If more space is n	nte as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
	and case number (if known			o uns page. On the top	on any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
2 Withi	in the last 8 years, have you	Llived in a community or	onerty state or territor	w? (Community proports	states and territories include
	i, California, Idaho, Louisiana				states and territories include
■ No. (	2- 4- 1: 2				
	Go to line 3. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
<b>—</b> 103.	Dia your spouse, former spo	use, or legal equivalent live	with you at the time:		
3. In Colu	mn 1 list all of your codeb	tors. Do not include your	snouse as a codebtor	if your snouse is filing	with you. List the person shown
in line 2	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	e creditor on Schedule D (Official
Form 1		I Form 106E/F), or Sched	ule G (Official Form 10	16G). Use Schedule D, S	Schedule E/F, or Schedule G to fill
0	Column 1: Your codebtor			Column 2. The are	ditor to whom you own the debt
	ame, Number, Street, City, State and Z	IP Code		Check all schedule	ditor to whom you owe the debt s that apply:
24				Cabadula D line	
3.1 N	lame			_ ☐ Schedule D, line ☐ Schedule E/F, line	<del></del>
				☐ Schedule G, line	
N	lumber Street			_	
	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			Schedule E/F, li	
				☐ Schedule G, line	
N	lumber Street			_	
С	ity	State	ZIP Code		

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Fill	in this information to identify your c	350.							
	otor 1 Sharon Rob								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK		_				
	se number nown)		-			eck if this is: An amende A suppleme	nt showing		
$\bigcirc$	fficial Form 106l					13 income a		owing date:	
	chedule I: Your Inc					MM / DD/ Y	YYY		12/15
Be a sup spo	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married peo are married and not filir Ir spouse is not filing wi	ng jointly, and your speith you, do not include	ouse i infori	s living wi	ith you, inclu out your spo	ude informa	ation about e space is	ible for your needed,
Par	t 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	Employment status	☐ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not er	mployed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed th	here?						
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to repo	ort for	any line, w	rite \$0 in the	space. Incl	ude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information fo	or all e	mployers f	or that perso	n on the line	es below. If	you need
					For [	Debtor 1	For Debi	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Sharon Roberts		C	ase number (if kr	nown)				
				1	For Debtor 1			Debtor		
	Cop	by line 4 here	4.	-	\$	0.00	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	\$ (	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. :		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. (	\$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	. :	\$ (	0.00	\$		N/A	
	5e.	Insurance	5e.			0.00	\$_		N/A	
	5f.	Domestic support obligations	5f.			0.00	. \$_		N/A	
	5g.	Union dues	5g.		. —	0.00	\$_		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+ 3	\$	0.00	+ \$_		N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	S	0.00	\$_		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	5	0.00	\$_		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-				•			
	٥L	monthly net income.	8a.			0.00	* *		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b.			0.00			N/A	
		settlement, and property settlement.	8c.			0.00	\$_		N/A	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.			0.00	* _ *		N/A	
	8f.	Other government assistance that you regularly receive	00	. ,	Ψ	0.00	Ψ_		N/A	
	OI.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$_		N/A	
	8g.	Pension or retirement income	8g		. —	0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	_ 8h.	.+ 3	\$	0.00	+ \$_		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(	0.00	\$_		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	0.00	+ \$		N/A	= \$	0.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			0.00			1471	_ ·	0.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		. ,		·		∍ <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain lies						ı. 12.	\$	0.00
12	Do	you expect an increase or decrease within the year after you file this form	2						Combined monthly i	
10.	<b>=</b>	No.	•							
	П	Yes, Explain:								

Official Form 106I Schedule I: Your Income page 2

						1					
Filli	n this informa	tion to identify yo	our case:								
Debt	tor 1	Sharon Robe	erts			Check	k if this is:				
							An amended filing				
Debt (Spo	or 2 buse, if filing)							ving postpetition chapter the following date:			
``					0.017						
Unite	ed States Bankı	ruptcy Court for the	EASTE	RN DISTRICT OF NEW Y	ORK	ľ	MM / DD / YYYY				
	e number										
		rm 106J									
		J: Your						12/15			
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.							
Part	1: Desci	ribe Your House	hold								
1.	Is this a joir										
	■ No. Go to	o line 2. es Debtor 2 live i	n a separ	ate household?							
	□N	0	•								
	ΠY	es. Debtor 2 mus	t file Offic	al Form 106J-2, Expenses	for Separate House	hold of Debto	or 2.				
2.	Do you hav	e dependents?	□ No								
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents				Daughter		20	■ Yes			
								□ No			
								☐ Yes			
								□ No □ Yes			
					-			☐ res			
								☐ Yes			
3.	, ,	oenses include		No				_ 100			
		f people other ti d your depende	han $_{\square}$	Yes							
	yoursen an	u your depende	1113:								
		ate Your Ongoi									
exp				uptcy filing date unless y y is filed. If this is a supp							
				government assistance i							
	value of suclicial Form 10		d have ind	cluded it on Schedule I: Y	our Income		Your exp	enses			
(OII	iciai Foriii 10	юі.)					Tour oxp				
4.		or home owners		ses for your residence. In	nclude first mortgage	4. \$		4,115.40			
	If not include	led in line 4:									
	4a. Real	estate taxes				4a. \$		0.00			
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b. \$		0.00			
				ıpkeep expenses		4c. \$		0.00			
_		owner's associat			and a model to the con-	4d. \$		0.00			
5.	Additional i	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00			

Debtor 1	Sharon I	Roberts	Case num	Case number (if known)					
6. <b>Uti</b>	lities:								
6a.		heat, natural gas	6a.	\$	200.00				
6b.	•	wer, garbage collection	6b.		50.00				
6c.		e, cell phone, Internet, satellite, and cable services	6c.	· -	150.00				
6d.	•		6d.	· · · · · · · · · · · · · · · · · · ·	0.00				
		ekeeping supplies		· -	500.00				
		children's education costs	8.	*					
			o. 9.	·	0.00				
	-	ry, and dry cleaning		· -	100.00				
	•	products and services	10.	· -	100.00				
		ntal expenses	11.	\$	0.00				
		Include gas, maintenance, bus or train fare.	12.	\$	100.00				
	not include c	clubs, recreation, newspapers, magazines, and books	13.	· -	0.00				
		the state of the s							
		ributions and religious donations	14.	\$	0.00				
	surance.	surance deducted from your pay or included in lines 4 or 20.							
	a. Life insura	, , ,	15a.	¢	0.00				
	a. Life irisura o. Health ins			· -	0.00				
_			15b.	· : —	0.00				
	c. Vehicle in		15c.	· <u> </u>	0.00				
		Irance. Specify:	15d.	\$	0.00				
	<b>xes.</b> Do not in ecify:	clude taxes deducted from your pay or included in lines 4 or	20. 16.	¢	0.00				
	·	ease payments:		Ψ	0.00				
		ents for Vehicle 1	17a.	\$	0.00				
		ents for Vehicle 2	17b.	· -	0.00				
	c. Other. Spe		17c.	·	0.00				
	d. Other. Spe	•	17d. 17d.	· -	0.00				
		of alimony, maintenance, and support that you did not re		Ψ	0.00				
de de	ducted from	your pay on line 5, Schedule I, Your Income (Official Form	n 106I). 18.	\$	0.00				
		s you make to support others who do not live with you.		\$	0.00				
	ecify:	,	19.	· -					
		erty expenses not included in lines 4 or 5 of this form or	on Schedule I: Yo	our Income.					
		s on other property	20a.		0.00				
20l	o. Real estat	e taxes	20b.	\$	0.00				
200	c. Property.	homeowner's, or renter's insurance	20c.	\$	0.00				
		nce, repair, and upkeep expenses	20d.		0.00				
		er's association or condominium dues	20e.	·	0.00				
_		or a abbolished of consorting and acco		+\$					
1. <b>Otl</b>	her: Specify:			-Ψ	0.00				
	•	monthly expenses							
228	a. Add lines 4	through 21.		\$	5,315.40				
22	o. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$					
		a and 22b. The result is your monthly expenses.		\$	5,315.40				
					0,010170				
	-	monthly net income.	<b>-</b> -	•					
		12 (your combined monthly income) from Schedule I.	23a.	· -	0.00				
23l	o. Copy your	monthly expenses from line 22c above.	23b.	-\$	5,315.40				
22,	Subtract v	our monthly expenses from your monthly income.							
230		is your <i>monthly net income</i> .	23c.	\$	-5,315.40				
For	example, do yo	an increase or decrease in your expenses within the year or expect to finish paying for your car loan within the year or do you exterms of your mortgage?			se or decrease because of a				
	No.	terms or your moregage:							
		[F							
	Yes.	Explain here:							

Debtor 1 Sharon Roberts First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK	
Case number(if known)	☐ Check if this is an amended filing
Official Form 106Dec  Declaration About an Individual Debtor's Schedules	12/15
obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,00 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below	0, or imprisonment for up to 20
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
■ No	
	kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration that they are true and correct.	on and
X /s/ Sharon Roberts X	
^ /3/ Ullai Ull 1\UDG[13	
Sharon Roberts Signature of Debtor 2 Signature of Debtor 1	

Fill in	this info	rmation to identify you	r case:						
Debtor	1	Sharon Roberts							
Dobte		First Name	Mic	ddle Name		Last Name			
Debtor (Spouse		First Name	Mic	ddle Name		Last Name			
United	States B	ankruptcy Court for the:	EASTE	RN DISTRICT OF	NEW Y	ORK			
Case r	number								
(if known									neck if this is an nended filing
Offic	ial E	orm 107							
		orm 107 t of Financial	Affairs	for Indivi	duals	Filing for E	Bankruptcy		4/10
Be as c informa numbe	complete ation. If r (if knov	and accurate as possi more space is needed, vn). Answer every que	ble. If two attach a s stion.	married people e eparate sheet to	are filing this for	g together, both are m. On the top of ar	e equally responsible		
Part 1:		Details About Your Ma		s and Where You	ı Lived i	Before			
1. W	hat is yo	ur current marital statu	is?						
	Marrie	ed							
	Not m	arried							
2. Du	ıring the	last 3 years, have you	lived anyv	where other than	where y	ou live now?			
	No								
	Yes. L	ist all of the places you l	ived in the	last 3 years. Do n	ot includ	le where you live no	N.		
D	ebtor 1 I	Prior Address:		Dates Debtor 1 lived there		Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
		last 8 years, did you ev ories include Arizona, Ca							
	No								
	Yes. N	Make sure you fill out Scl	nedule H: Y	our Codebtors (O	fficial Fo	orm 106H).			
Part 2	Expl	ain the Sources of You	r Income						
Fil	I in the to	ve any income from en tal amount of income yo ling a joint case and you	u received	from all jobs and	all busin	esses, including par	t-time activities.	us calend	dar years?
	No								
	Yes. F	ill in the details.							
			Debtor 1				Debtor 2		
				of income that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)
	st calend ary 1 to [	lar year: December 31, 2017)	■ Wages	s, commissions, tips		\$43,000.00	☐ Wages, commiss bonuses, tips	sions,	
			☐ Opera	ting a business			☐ Operating a busi	ness	

Official Form 107

Del	otor 1	Sha	aron Rob	erts		Case number (if known)						
5.	Includ and of	le inc ther p	ome regar oublic bene	dless of wheth efit payments;	ner that inc pensions;	come is taxable. E rental income; in	Examples of terest; divi	dends; money colle	alimony; child supp	royalties; and	ecurity, unemployment, d gambling and lottery	
	List ea	ach s	ource and	the gross inco	ome from	each source sepa	rately. Do	not include income	that you listed in lir	ne 4.		
■ No □ Yes. Fill in the details.												
					Sources Describe	s of income	each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
Par	rt 3:	List	Certain Pa	ayments You	Made Be	fore You Filed fo	or Bankrui	otcy				
6.	Are ei	ither No. Ƴes.	Debtor 1': Neither Dindividual During the No. Yes  * Subject Debtor 1 During the No. Yes	s or Debtor 2 Debtor 1 nor Debtor 1 nor Debtor 2 Debtor 1 nor Debtor 2 Debtor 2 not line 7 Debtor 2 not include to adjustment or Debtor 2 not person of the	's debts poets of a personal p	primarily consunts primarily consunts primarily consunts primarily consunts to the defendent of the defenden	marily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incumily, or household purpose."  for bankruptcy, did you pay any creditor a total of \$6,425* or more?  It to whom you paid a total of \$6,425* or more in one or more payments and the total amount include payments for domestic support obligations, such as child support and alimony. In an attorney for this bankruptcy case.  In an and every 3 years after that for cases filed on or after the date of adjustment.  It is primarily consumer debts.  It is primarily consumer debts.					
	Cred	litor's	Name an	d Address		Dates of payr	ment	Total amount paid	Amount you still owe	Was this p	ayment for	
7.	Within 1 year before you filed for be Insiders include your relatives; any ge of which you are an officer, director, p a business you operate as a sole propalimony.  No Yes. List all payments to an insider's Name and Address				general p , person in roprietor.	artners; relatives n control, or owne	of any gen er of 20% o Include pay	eral partners; partn r more of their votir	erships of which yong securities; and ar	u are a gener ny managing s, such as ch	al partner; corporations agent, including one for	
								paid	still owe			
8.	inside Includ	er? le pay	ments on		teed or co	tcy, did you mak		ments or transfer	any property on a	ecount of a c	lebt that benefited an	
			Name and		J.401	Dates of payr	ment	Total amount	Amount you	Reason for	r this payment	
						J v. puji	****	paid	still owe		ditor's name	

Deb	btor 1 Sharon Roberts		Case number (if known)								
Par	rt 4: Identify Legal Actions, Re	possessions, ar	nd Foreclosures								
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.										
	□ No ■ Yes. Fill in the details.  Case title Case number  Sellect Portfolio Service v. Sharon Roberts										
			ture of the case	Court or agency	Status of the	■ Pending □ On appeal □ Concluded					
			Foreclosure	Suffolk County Suprem Court	☐ On appe						
	Sellect Portfolio Service v. Sharon Roberts		oreclosure tion on vestment operty	Suffolk Supreme Court	■ Pending □ On appo	eal					
					3010 Watchhill Avenue, Medford, NY						
	Within 1 year before you filed for Check all that apply and fill in the old No. Go to line 11.  ☐ Yes. Fill in the information be	details below.	,.,.,.,.,	, ,	, <b>3</b>						
	Creditor Name and Address		scribe the Property plain what happened		Date	Value of the property					
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  Yes Fill in the details										
	Creditor Name and Address	De	scribe the action the	creditor took	Date action was taken	Amount					
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?										
	■ No □ Yes										
Par	rt 5: List Certain Gifts and Con	tributions									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No										
	Yes. Fill in the details for each Gifts with a total value of more per person	3	Describe the gifts		Dates you gave the gifts	Value					
	Person to Whom You Gave the Address:	Gift and									

Del	otor 1 Sharon Roberts		C	ase number (	if known)					
4.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No									
	Yes. Fill in the details for each gift or contribution.									
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed		Dates you contributed	Value				
Par	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?									
	■ No									
	☐ Yes. Fill in the details.									
	Describe the property you lost and	Descr	ibe any insurance coverage for the lo	SS	Date of your	Value of property				
	how the loss occurred		e the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: F		loss	lost				
Par	t 7: List Certain Payments or Transfer	rs								
7.	No Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You  Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  No									
	Yes. Fill in the details.									
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.									
	Person Who Received Transfer		property transferred payn		any property or	Date transfer was				
	Address				received or debts change	made				
	Person's relationship to you									
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No									
	Yes. Fill in the details.									
	Name of trust		Description and value of the property transferred			Date Transfer was made				

Case number (if known)

Pai	t 8: List of Certain Financial Accounts, Inst	ruments Safe Denosi	Royes and Sto	rage I Init	e			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	were any financial ac	counts or instru	ments he	ld in your name, or for y			
	Yes. Fill in the details.							
		Last 4 digits of account number	Type of account instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe de <sub>l</sub>	posit box or other depos	tory for securities,		
	No							
	Yes. Fill in the details.					-		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear befor	e you filed for bankrupto	ey?		
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility	Who else has or had access			the contents	Do you still		
	Address (Number, Street, City, State and ZIP Code)  **Voil of erse has of flad access to it?  Address (Number, Street, City, State and ZIP Code)  **Address** (Number, Street, City, State and ZIP Code)			Besonbe	have it?			
Par	t 9: Identify Property You Hold or Control for	or Someone Else						
23.	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any property	you bori	rowed from, are storing f	or, or hold in trust		
	No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Pai	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groundv	• .	· ·			
	Site means any location, facility, or property to own, operate, or utilize it, including dispos		environmental la	w, wheth	er you now own, operate	, or utilize it or used		
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, con		as a hazardous v	waste, ha	zardous substance, toxi	substance,		
Rep	ort all notices, releases, and proceedings that	you know about, rega	ardless of when	they occu	ırred.			
24.	Has any governmental unit notified you that y	ou may be liable or po	otentially liable ι	ınder or i	n violation of an environ	mental law?		
	■ No							
	☐ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)		Enviro know	onmental law, if you it	Date of notice		

Debtor 1 Sharon Roberts

Deb	otor 1	Sharon Roberts		Cas	e number (if known)					
25.	Have	e you notified any governmental unit o	f any release of hazardous material?							
		No								
		Yes. Fill in the details.								
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
26.	Have	e you been a party in any judicial or ad	ministrative proceeding under any envir	onm	nental law? Include settlements a	and orders.				
		No								
		Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case				
Par	t 11:	Give Details About Your Business or	Connections to Any Business							
27.	With	- in 4 vears before vou filed for bankrup	otcy, did you own a business or have any	v of	the following connections to any	business?				
		•	in a trade, profession, or other activity,		•					
		☐ A member of a limited liability com	pany (LLC) or limited liability partnership	p (Ll	_P)					
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
		No. None of the above applies. Go to Part 12.								
		• •	eck all that apply above and fill in the details below for each business.							
	Business Name		Describe the nature of the business		Employer Identification number					
		Iress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.  Dates business existed					
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	otcy, did you give a financial statement to	o an	yone about your business? Inclu	ide all financial				
		No								
		Yes. Fill in the details below.								
	Nan	ne Iress	Date Issued							
		nber, Street, City, State and ZIP Code)								
Par	t 12:	Sign Below								
are with	true a a ba J.S.C.	and correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	inancial Affairs and any attachments, and a false statement, concealing property, o \$250,000, or imprisonment for up to 20	r ob	taining money or property by fra					
		on Roberts Roberts	Signature of Debtor 2							
_		re of Debtor 1	· ·							
Dat	e A	August 14, 2018	Date							
Did ■ N □ Y	lo	nttach additional pages to Your Statem	ent of Financial Affairs for Individuals Fi	iling	for Bankruptcy (Official Form 10	07)?				
Did	you p	pay or agree to pay someone who is no	ot an attorney to help you fill out bankrup	ptcy	forms?					
■ N □ Y		ame of Person . Attach the Bankro	uptcy Petition Preparer's Notice, Declaration	n, aı	nd Signature (Official Form 119).					
	ial For	<del></del>	ment of Financial Affairs for Individuals Filing		,	page 6				

Debtor 1	Sharon Roberts	Case number (if known)	
Debioi i	Sharon Roberts	Case Hullibel (II known)	

Fill in this info	rmation to identify your	case:		
Debtor 1	Sharon Roberts			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTF	RICT OF NEW YORK	
Coop number				
Case number (if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	iduals Filing Under Chapt	er 7
			<u> </u>	
If you are an inc	dividual filing under cha	pter 7, you must fil	ll out this form if:	
_	ve claims secured by yo			
	ised personal property a		ot expired.  you file your bankruptcy petition or by the date:	set for the meeting of creditors
which	ever is earlier, unless th		e time for cause. You must also send copies to t	
on the	e form			
		r in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
sign a	and date the form.			
	and accurate as possib your name and case nur		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Wille	your name and case num	ilber (il kilowii).		
Part 1: List	Your Creditors Who Have	e Secured Claims		
1. For any credi		art 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	reditor and the property the	hat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's	Sellect Portfolio Servi	ice	■ Surrender the property.	□ No
name:			Retain the property and redeem it.	<b>-</b>
Description of	of 26 Bloomington St	reet Medford.	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	NY 11763 Suffolk		☐ Retain the property and [explain]:	
securing deb	t: Residence			
Creditor's	Sellect Portfolio Servi	ice		<b>=</b>
name:	Conect i Ortiono Servi		<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	■ No
namo.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	☐ Yes
Description of	of 3010 Watchhill Ave	enue Medford,	Reaffirmation Agreement.	

Part 2: List Your Unexpired Personal Property Leases

NY 11763 Suffolk County

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

securing debt: Investment property

Will the lease be assumed?

Official Form 108

property

Deb	otor 1	Sharon Roberts	Case number (if known)
			<u>_</u>
	sor's n		□ No
	perty:	n of leased	□ v
0	porty.		☐ Yes
Les	sor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
Les	sor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
Les	sor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
Les	sor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
	sor's n		□ No
		n of leased	
Pro	perty:		☐ Yes
Les	sor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
Par	t 3:	Sign Below	
Und	er pen perty th	alty of perjury, I declare that I have indica nat is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
_			v
X		haron Roberts	X Signature of Debtor 2
	Sharon Roberts Signature of Debtor 1		Signature of Debtor 2
	Oigilia	action of Dobtor 1	
	Date	August 14, 2018	Date

Fill in this inf	ormation to identify your case:				only as d	irected in this form and	in Form
Debtor 1	Sharon Roberts			2A-1Supp:			
Debtor 2 (Spouse, if filing)	-			■ 1. There is	no pres	umption of abuse	
United State	s Bankruptcy Court for the: Eastern District of	New York	'			o determine if a presur nade under <i>Chapter 7</i>	
Case numbe	ır		,	Calcula —	tion (Off	icial Form 122A-2).	
(ii kilowil)						does not apply now be service but it could ap	
Official	Form 100A 1			☐ Check if	this is a	n amended filing	
	Form 122A - 1		. 41 1 1				
Chapte	r 7 Statement of Your Cui	rent Mor	nthly inc	ome			12/15
attach a separ case number ( qualifying mili	e and accurate as possible. If two married people ate sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	which the additior om a presumption	nal information a of abuse becau	applies. On the se you do not	top of a	ny additional pages, writ narily consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one or	 ∩ly.					
■ Not	married. Fill out Column A, lines 2-11.	•					
	ried and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
☐ Mar	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
□Li	ving in the same household and are not lega	ally separated.	- Fill out both Co	lumns A and I	B, lines 2	2-11.	
□ Li	ving separately or are legally separated. Fill	out Column A, li	nes 2-11; do no	ot fill out Colur	nn B. By	checking this box, you	ı declare under
	enalty of perjury that you and your spouse are l ving apart for reasons that do not include evadi						spouse are
101(10A). F the 6 month	average monthly income that you received from all for example, if you are filing on September 15, the 6-mas, add the income for all 6 months and divide the total on the same rental property, put the income from that property.	nonth period would I by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. de any income a	If the amo amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	0.00	\$	
Column	y and maintenance payments. Do not include B is filled in.	• •	•	\$	0.00	\$	
of you from an and roo	ounts from any source which are regularly proor your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a specific process.	. Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
	Do not include payments you listed on line 3. ome from operating a business, profession,	or farm		Ψ		Ψ	
o. Net inc	one from operating a business, profession,		otor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
Ordinar	y and necessary operating expenses	-\$ 0.00					
Net mo	nthly income from a business, profession, or far	m \$ <b>0.00</b>	Copy here ->	\$	0.00	\$	
6. Net inc	ome from rental and other real property						
			otor 1				
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00					
	y and necessary operating expenses	·	Copy here ->	¢	0.00	\$	
	nthly income from rental or other real property	\$	Copy nere ->		0.00	\$	
<ol><li>7. Interes</li></ol>	t, dividends, and royalties			\$	0.00	<del>-</del>	

Official Form 122A-1

Case number (if known)

							Column A Debtor 1	1	Column B Debtor 2 or non-filing	-	
8.	Unem	nployr	ment compensation				\$	0.00	\$		
			r the amount if you co Security Act. Instead,		ount received was a b	enefit under					
	For	you	•		\$	0.00					
	For	your	spouse		\$						
9.	Pensi	ion or	retirement income. er the Social Security	Do not include any	amount received that	t was a	\$	0.00	\$		
10	Incon	ne fro	m all other sources	not listed above.	Specify the source an all Security Act or pay						
	receiv	ed as	a victim of a war crim	ne, a crime against	humanity, or internation a separate page ar	onal or					
							\$	0.00	\$		
							\$	0.00	\$		
		To	tal amounts from sep	arate pages, if any		+	\$	0.00	\$		
11	Calcu	ılate v	our total current mo	onthly income. Add	d lines 2 through 10 fo	or					
			n. Then add the total			\$	0.00	+ -		= \$	0.00
											rrent monthly
Part	2:	Dete	rmine Whether the I	Means Test Applie	es to You					income	
12	Calcu	ılate y	our current monthly	income for the y	ear. Follow these step	os:					
		_	_	_	ne 11		Co	nv line 11 l	nere=>	\$	0.00
	120. (	оору у	roar total ourrent mon	any moonie nom m				py mic i i	1010-2	Ψ	0.00
	N	Multipl	y by 12 (the number o	of months in a year	)					<b>x</b> 1:	2
	12b. 7	The re	sult is your annual ind	come for this part o	f the form				12b	. \$	0.00
13	Calcu	ılate ti	he median family inc	come that applies	to you. Follow these	stens:					
10			-	omo mar appiloo							
	FIII IN	the sta	ate in which you live.		NY						
	Fill in	the nu	ımber of people in yo	ur household.	2						
			edian family income f	•	*******				13.	\$6	8,087.00
					go online using the ling ankruptcy clerk's office		in the sepa	rate instruc	tions		
14	How	do the	e lines compare?								
	14a.		Line 12b is less than Go to Part 3.	or equal to line 13	3. On the top of page	1, check box	1, There is	s no presun	nption of abus	e.	
	14b.				op of page 1, check be	ox 2, The pr	esumption	of abuse is	determined by	y Form 12	2A-2.
Part	3:	Sign	Below								
				nder penalty of per	jury that the information	on on this sta	atement an	d in any atta	achments is tr	ue and co	rrect.
	v	, ,	Charen Deborte	. , , ,	, ,			·			
	Х		Sharon Roberts aron Roberts								
			nature of Debtor 1								
	Date		gust 14, 2018 / DD / YYYY								
	ı		Checked line 14a, do	NOT fill out or file F	Form 122A-2						
		•	•		nd file it with this form.						
		, you t	JIIOUNUU IIIIE 170, IIII (	, ut i Ullil 1227-2 al	IN THE REWALL WHO TO THE	•					

**Sharon Roberts** 

Debtor 1

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Eastern District of New York

	Eas	tern District of New Yor	k			
In	re Sharon Roberts		Case No.	<u> </u>		
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	ENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	2,500.00		
	Prior to the filing of this statement I have received		\$	2,500.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	☐ Debtor ☐ Other (specify): Legal	I and filing fees paid by fam	ily			
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensopy of the agreement, together with a list of the na					
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspect	s of the bankruptcy c	ease, including:		
	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, sta</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on he</li> </ul>	tement of affairs and plan which tors and confirmation hearing, an reduce to market value; exc ons as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof;  preparation and filing of		
5.	By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.					
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in		
_	August 14, 2018	/s/ Donald Neidha				
	Date	Donald Neidhard Signature of Attorne				
		Neidhardt Law				
		3579 Bayview Str Seaford, NY 1178				
		(516) 809-7900 F	ax: (866) 694-852	3		
		pj@neidhardt.lav  Name of law firm	I			
		ivame oj iaw jirm				

# **United States Bankruptcy Court Eastern District of New York**

In re	Sharon Roberts		Case No.		
		Debtor(s)	Chapter	7	

### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

USBC-44 Rev. 9/17/98

Caine & Weiner Co Po Box 55848 Sherman Oaks, CA 91413

Capital One 15000 Capital One Dr Richmond, VA 23238

Credit One Bank Na Po Box 98875 Las Vegas, NV 89193

Goldkey Cred P O Box 15670 Brooksville, FL 34604

Jpm Chase P.o. Box 182057 Columbus, OH 43219

Merrick Bank Corp Pob 9201 Old Bethpage, NY 11804

Navient Po Box 9655 Wilkes Barre, PA 18773

Sellect Portfolio Service P.O. Box 65450 Salt Lake City, UT 84165-0450

Sellect Portfolio Service P.O. Box 65450 Salt Lake City, UT 84165-0450

#### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

## STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

<b>DEBTOR(S):</b>	Sharon Roberts	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the .]
NO RELATED	CASE IS PENDING OR HAS I	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDUL SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	ls who have had prior cases dismissed within the preceding 180 days may not tired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	TTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	York (Y/N): <b>Y</b>
CERTIFICATION (to be signed by pro se debtor/petition	ner or debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankrupt as indicated elsewhere on this form.	tcy case is not related to any case now pending or pending at any time, except
/s/ Donald Neidhardt	
Donald Neidhardt Signature of Debtor's Attorney Neidhardt Law 3579 Bayview Street	Signature of Pro Se Debtor/Petitioner
Seaford, NY 11783 (516) 809-7900 Fax:(866) 694-8523	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009